

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

RECEIVED  
FEC MAIL CENTER  
2016 APR -6 AM 7:41

1. (a) Name of Individual, Organization or Corporation <i>Harvey P. Dosik</i>	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>1453 30<sup>th</sup> Ave.</i>	
(c) City, State and ZIP Code <i>Santa Cruz, CA 95062</i>	
2. Occupation and Name of Employer (for Individual Filers Only) <i>Retired</i>	3. FEC Identification Number <i>C90015595</i>

#### 4. TYPE OF REPORT (check appropriate boxes):

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment?

☒ No

☐ Yes, it amends the report filed on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

#### 5. COVERING PERIOD:

FROM

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

THROUGH

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

6. TOTAL CONTRIBUTIONS

MM / DD / YYYY

7. TOTAL INDEPENDENT EXPENDITURES

MM / DD / YYYY

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

*Harvey P. Dosik*

SIGNATURE

*Harvey P. Dosik*

DATE

*4-1-16*

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100